

PSJ3

Exhibit 673

MEMO TO: Board of Directors

DATE: July 21, 2000

SUBJECT: **Robert Wood Johnson Foundation**

Robin Hogen and I spent several hours on Monday visiting with the President and senior staff of the Robert Wood Johnson Foundation in Princeton. As you may know, the RWJ Foundation is the world's largest philanthropy devoted exclusively to improving healthcare. It's assets, which are heavily weighted with J&J stock (over 60%) total over \$8 billion; their annual payout in grants is a stunning \$400 million and growing.

They concentrate their grant making in three areas: increasing access to basic healthcare at a reasonable cost, improving care for people with chronic health conditions, and reducing the incidence of substance abuse (tobacco is included in that category). Under the rubric of improving care for the chronically ill, the Foundation has established a multi-million dollar program to create state-based commissions and task forces to identify and implement changes in policy and practice to improve care for people at the end of life. In addition, the Foundation recently established a national center to advance palliative care at Mount Sinai School of Medicine in Manhattan (\$4.7 million grant over four years).

The Foundation devotes a large portion of it's resources in educational programs at three levels: professional education - to change patterns of practice; institutionally-focused education - to change policies (in this context they have been actively supporting the new JCAHO Pain Standards), and public education to change health habits. We discussed the thousands of educational programs supported by Purdue Pharma and our sponsorship of the Partners Against Pain initiative. They were impressed with the scope of our programs and invited Purdue to join the national coalition they are forming to improve care and caring at the end of life (called the Last Acts Partnership). We would be the only for-profit company in that category. Dr. Steve Schroeder, President of the RWJ Foundation, indicated that they rarely sit down with pharmaceutical companies to discuss areas of mutual interest. He was impressed when we described the unbranded, non-promotional aspect of our speakers bureaus and symposia and seemed quite interested in keeping the lines of communications open for possible future partnerships.

Among the areas of possible future collaboration are the following:

1. Technical advice in how best to set up a series of "Purdue Faculty Fellowships" in palliative care and pain management. Evidently Roxanne has a similar program which we need to benchmark against.
2. Help in identifying pain management advocates in both the political and medical arenas. In that context, Dr. Schroeder mentioned a recent visit with Representative Nancy Johnson of New Britain. Evidently, Representative Johnson is married to an M.D. and is an advocate for good end of life care. She would be receptive to Purdue's education efforts in this area.
3. Sponsorship of a session on pain management at the annual meeting of the New Jersey State Medical Board.

I'm sure there are other possible areas of joint collaboration. I believe our next step should be to organize a meeting for Sally Riddle and Mark Alfonso with the staff members working on the RWJ Last Acts Program.

I believe this is a relationship that could yield many happy returns to both Purdue and RWJ.

Submitted by: Robin Hogen